

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10001844-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

patent is sought on the invention entitled:				
Filler Material And Pret	reatment Of Printed Circuit	Board Components	To Facilitate Application Of A	
	ch is attached hereto unless th	ne following box is ch	necked:	
() was filed on		=	CT International Application	
Number	and was amended on	(if a	applicable).	
including the claims, as	ive reviewed and understood amended by any amendmer vhich is material to patentabili	nt(s) referred to abou	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.	
Foreign Application(s) and/or C	laim of Foreign Priority			
inventor(s) certificate listed be	benefits under Title 35, United Sta low and have also identified below a oplication on which priority is claime	ny foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate having a	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMEO UNOER 35 U.S.C. 119	
N/A			YES: NO:	
			YES: NO.	
Provisional Application				
I hereby claim the benefit und below:	ler Title 35, United States Code Sec	ction 119(e) of any Unite	d States provisional application(s) listed	
	APPLICATION SERIAL NUMBER	FILING DATE	\neg	
	N/A			
information as defined in Title	37, Code of Federal Regulations, Se PCT international filing date of this a	ection 1.56(a) which occur pplication:	nowledge the duty to disclose material rred between the filing date of the prior	
N/A		314103	paterned/pending/abandoned)	
POWER OF ATTORNEY: As a named inventor, I herek business in the Patent and Trac	by appoint the following attorney(s) demark Office connected therewith:	and/or agent(s) to pros	ecute this application and transact all	
Customer N	umber 022879	Number Bar Code Label here		
Send Correspondence to:		Direct Telephone	Calls To:	
HEWLETT-PACKARD COMPANY Intellectual Property Administration		Kevin Hart		
P.O. Box 272400 Fort Collins, Colorado 80527-2400		(970) 898-7057		
I hereby declare that all made on information and the knowledge that willf or both, under Section 1	statements made herein of r belief are believed to be true ul false statements and the li	e; and further that th ke so made are puni d States Code and th	are true and that all statements ese statements were made with shable by fine or imprisonment, at such willful false statements	
Full Name of Inventor: Lowell E Kolb		Citizenship: US	3	
Residence: 750	8 Sunrise Ridge Loveland, CO	80538		
Post Office Address: Sam	ie			
Lowell C. Toll		March.	1, 2001	
Inventor's Signature		Date	, , 200 1	

FOR PATENT APPLICATION (continued)

DECLARATION AND POWER OF ATTORNEY

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Full Name of # 2 joint inventor:	Kristina L Mann	Citizenship: US		
Residence:	2112 Stoney Pine Court Fort Collins CO 80525			
Post Office Address:	Same as residence			
V. I In a	m	3/2/0) Date		
Full Name of # 3 joint inventor:		Citizenship: US		
Residence:	5317 Fossil Creek Drive Ft Collins, CO 80526			
Post Office Address:	Same as residence	3-02-01		
Inventor's Signature	62 - 1	Date		
Full Name of # 4 joint inventor		Citizenship: US		
Residence:	630 North Briarwood Road Fort Collins, CO 80521			
Post Office Address;				
Inventor's Signature	guher)	3/5/01 Date		
Full Name of # 5 joint inventor	: Keri K Sibley	Citizenship: US		
Residence:	300 East Swallow Road Fort Collins, CO 80525			
Post Office Address: Same as Residence		03/02/01		
Inventor's Signature	In the second se	Date		
Full Name of # 6 joint invento	r:	Citizenship:		
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 7 joint invento	or:	Citizenship:		
Residence:				
Post Office Address:				
Inventor's Signature		Date		
Full Name of # 8 joint invent	or:	Citizenship:		
Residence:				
Post Office Address:				
Inventor's Signature		Date		

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